

FILING/RECEIPT DATE APPLICATION NUMBER 09/089,894 9603/374-164 **METER ROBALSKYJ** IGNED MEXON MARGRAVE DEVA İNTÜN SQUARE ្សី Box រប់ទរ RUCHESTER NY 14603 NOTICE TO FILE MISSING PARTS OF APPLIC Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay fees required below to avoid

entity in compliance with 37 CFR 1.27, or 🛭 \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.
if all required items on this form are filed within the period set above, the total amount owed by applicant as a ☐ small entity (statement filed) ☐ non-small entity is \$
☐ 1. The statutory basic filing fee is:
insufficient.
such status (37 CFR 1.27).
2. Additional claim fees of \$, including any multiple dependent claim fees, are required.
for independent claims over 3.
\$ for 3 dependent claims over 20.
for multiple dependent claim surcharge.
Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.
(a) 3. The oath or declaration: Control of the c
does not cover the newly submitted items.
does not identify the application to which it applies. does not include the city and state or foreign country of applicant's residence.
An oath or declaration in compliance with 37 ČFR 1. 63, including residence information and identifying the application by the above Application Number and Filing Date is required.
 □ 4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42,
1.43 or 1.47.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
☐ 5. The signature of the following joint inventor(s) is missing from the oath or declaration:
An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.
 ☐ 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).
☐ 7. Your filing receipt was mailed in error because your check was returned without payment.
8. The application does not comply with the Sequence Rules.
See attached "Notice to Comply with Sequence Rules 37 CFR 1.821-1.825."
L 5. Officers
Direct the reply and any questions about this notice to "Attention: Box Missing Parts."
Direct the reply and any questions about this notice to "Attention: Box Missing Parts." A copy of this notice MUST be returned with the reply.

Customer Service Center Initial Patent Examination Division (703) 308-1202